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Promotion and protection of the rights of children

Rights of the child

Note by the Secretary-General

The Secretary-General has the honour to transmit to the members of the General Assembly the report of the independent expert for the United Nations study on violence against children, Paulo Sérgio Pinheiro, submitted pursuant to General Assembly resolution 60/231.

The Secretary-General trusts that the General Assembly will give thorough consideration to this study and to the mechanisms required for following up and monitoring the implementation of the conclusions and recommendations it will adopt on this important subject.

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Report of the independent expert for the United Nations study on violence against children

Summary

This report, which is based on the in-depth study of Paulo Sérgio Pinheiro, independent expert appointed by the Secretary-General pursuant to General-Assembly resolution 57/90 of 2002, provides a global picture of violence against children and proposes recommendations to prevent and respond to this issue. It provides information on the incidence of various types of violence against children within the family, schools, alternative care institutions and detention facilities, places where children work and communities. The Study is accompanied by a book which provides a more detailed account of the Study.

The Study was prepared through a participatory process which included regional, subregional and national consultations, expert thematic meetings and field visits. Many Governments also provided comprehensive responses to a questionnaire transmitted to them by the independent expert in 2004.

The independent expert is grateful for the broad support for his work provided by Governments, regional bodies and intergovernmental bodies, as well as from United Nations entities, civil society organizations and children.

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I. Introduction: protecting children from violence

1. No violence against children is justifiable; all violence against children is preventable. Yet the in-depth study on violence against children (the Study) confirms that such violence exists in every country of the world, cutting across culture, class, education, income and ethnic origin. In every region, in contradiction to human rights obligations and children's developmental needs, violence against children is socially approved, and is frequently legal and State-authorized.

2. The Study should mark a turning point — an end to adult justification of violence against children, whether accepted as "tradition" or disguised as "discipline". There can be no compromise in challenging violence against children. Children's uniqueness — their potential and vulnerability, their dependence on adults — makes it imperative that they have more, not less, protection from violence.

3. Every society, no matter its cultural, economic or social background, can and must stop violence against children. This does not mean sanctioning perpetrators only, but requires transformation of the "mindset" of societies and the underlying economic and social conditions associated with violence.

4. This Study is the first comprehensive, global study conducted by the United Nations on all forms of violence against children. It builds on the study on the impact of armed conflict on children, which was prepared by Graça Machel presented to the General Assembly 10 years ago, and is inspired by the World Health Organization's *World Report on Violence and Health*. It is also the first global study to engage directly and consistently with children. Children have participated in all regional consultations held in connection with the Study, eloquently describing both the violence they experience and their proposals for ending it.

5. Violence against children is multidimensional and calls for a multifaceted response. This Study combines human rights, public health and child protection perspectives, and experts in these different fields have collaborated to support its preparation. The Study has benefited from the growing body of scientific studies that have examined the causes, consequences and preventability of violence against children.

6. Protection of children from violence is a matter of urgency. Children have suffered adult violence unseen and unheard for centuries. Now that the scale and impact of all forms of violence against children is becoming better known, children must be provided with the effective prevention and protection to which they have an unqualified right.

A. Mandate and scope of the Study

7. In 2001, on the recommendation of the Committee on the Rights of the Child, the General Assembly in its resolution 56/138 requested the Secretary-General to conduct an in-depth study on the question of violence against children and to put forward recommendations for consideration by Member States for appropriate action. In February 2003, I was appointed by the Secretary-General to lead this study.

8. The Study adopts the definition of the child as contained in article 1 of the Convention on the Rights of the Child: "[e]very human being below the age of eighteen years unless, under the law applicable to the child, majority is attained earlier". The definition of violence is that of article 19 of the Convention: "all forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse". It also draws on the definition in the *World Report on Violence and Health* (2002): the intentional use of physical force or power, threatened or actual, against a child, by an individual or group, that either results in or has a high likelihood of resulting in actual or potential harm to the child's health, survival, development or dignity.[1]

9. The report addresses violence against children within different settings: the family, schools, alternative care institutions and detention facilities, places where children work, and communities. It does not address children in armed conflict, as this issue falls within the mandate of the Special Representative of the Secretary-General for Children and Armed Conflict, but it considers related issues, such as violence against refugees and other displaced children.

10. This report is supplemented by a book containing in-depth coverage of the study findings and recommendations, as well as a child-friendly version of the present report.

B. The Study process

11. In preparing the Study, I implemented a participatory process which included regional, subregional and national consultations, expert thematic meetings and field visits. In March 2004, I circulated a detailed questionnaire to Governments on their approaches to violence against children. I received a total of 131 responses.[2]

12. Between March and July 2005, nine regional consultations: for the Caribbean, South Asia, West and Central Africa, Latin America, North America, East Asia and the Pacific, the Middle East and North Africa, Europe and Central Asia, and Eastern and Southern Africa, were convened. Each consultation brought together an average of 350 participants, including Government ministers and officials, parliamentarians, representatives of regional and other intergovernmental organizations and United Nations entities, non-governmental organizations (NGOs), national human rights institutions (NHRIs), other parts of civil society, including the media and faith-based organizations, and children. Children participated in each regional consultation, which were all preceded by meetings where they developed inputs and recommendations for the Study. Reports for each regional consultation, including its recommendations, are available. A number of subregional and national consultations were also held.

13. Governments that hosted these consultations were actively involved in the promotion of the Study. Regional organizations, including the African Union, the Arab League, the Caribbean Community (CARICOM), the Council of Europe, the European Union, the Inter-American Commission on Human Rights of the

[1] E. G. Krug et al. (eds.), *World Report on Violence and Health* (Geneva, World Health Organization, 2002), p. 5.

[2] All responses are available at the OHCHR website: http://www.ohchr.org/english/bodies/crc/study.htm.

Organization of American States and the South Asian Association for Regional Cooperation, played important roles in the organization of consultations. National and regional organizations have committed themselves to ongoing involvement in the follow-up to the Study.

14. I undertook field visits in Argentina, Canada, China, El Salvador, Guatemala, Haiti, Honduras, India, Israel and the Occupied Palestinian Territories, Mali, Pakistan, Paraguay, Slovenia, South Africa, Thailand and Trinidad and Tobago. I am very grateful to those who facilitated the visits and to the Governments of those States in which visits and consultations took place.

15. I held regular consultations with members of the Committee on the Rights of the Child and special procedure mandate holders of the former Commission on Human Rights. The concluding observations on States parties' reports to the Committee were analysed, as were the reports of relevant special procedure mandate holders.

16. The Study and its secretariat in Geneva have been supported by three United Nations entities: the Office of the United Nations High Commissioner for Human Rights (OHCHR), the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO), together with a multidisciplinary Editorial Board of experts.

17. Many other organizations made contributions to the Study, including the International Labour Organization (ILO), the Office of the United Nations High Commissioner for Refugees (UNHCR), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Office on Drugs and Crime (UNODC) and the Division for the Advancement of Women of the United Nations Department of Economic and Social Affairs. A United Nations inter-agency group has met to develop strategies of follow-up to the Study.

18. I have also drawn on many inputs made to the Study over the last three years by different stakeholders, including children. More than 270 individuals and organizations from many parts of the world responded to my call for public submissions. Contributions included submissions from children and major research reports commissioned specifically for the Study.[3]

19. NGOs made significant contributions, including written submissions. An NGO Advisory Panel, including children and youth, was established early in the Study process which included representatives from all regions. I maintained close contact with the Subgroup on Children and Violence established within the NGO Group for the Convention on the Rights of the Child.

20. In addition to preparing numerous studies, the International Save the Children Alliance made a special contribution by advising on and facilitating the involvement of children, in particular in the regional consultations, together with UNICEF and other partners. The global Child Rights Information Network (CRIN) has documented the progress of the Study, including my meetings with children, making it widely available on its website.[4]

[3] The list of submissions is available at the website of the United Nations Secretary-General's Study on Violence against Children: http://www.violencestudy.org.

[4] Child Rights Information Network (CRIN): http://www.crin.org/violence/.

21. Research centres and networks submitted information and participated in consultations. The UNICEF Innocenti Research Centre provided studies on trafficking of children, female genital mutilation and human rights standards and mechanisms to protect children. Thematic meetings on gender-based violence, schools, the home and family, children with disabilities, juvenile justice systems and children in conflict with the law, the role of faith-based organizations, information and communication technologies, refugee and other displaced children, and methodologies for measuring violence were also convened.

22. The preparation of the Study has provoked regional and national action. In many countries, the preparation of responses generated national debate, inspired action, and has already generated follow-up activities. In the Middle East and North Africa, the original Steering Committee for the consultation has been transformed into a regional follow-up mechanism, expanding membership to include representatives from local governments, as well as emphasizing the role of the Arab League. The South Asian Forum for Ending Violence against Children, an intergovernmental body, has been established at ministerial level with representation from all countries, with Pakistan hosting the secretariat for the first two years. Following the commitments voiced at the consultation in Ljubljana, the Council of Europe launched the programme "Building a Europe for and with Children" in April 2006, which focuses on providing policy and technical support to countries to end violence against children and will serve as a follow-up mechanism to the Study. In May 2006, children who had participated in the regional consultations met in New York to consolidate recommendations for further action adopted at those consultations and other meetings.

23. The Study process has created high expectations, particularly among children, who wish to see it become a catalyst for real and lasting change. I wish to offer my profound thanks to all those who participated in it.

II. A global problem

24. Reports of cruel and humiliating punishment, genital mutilation of girls, neglect, sexual abuse, homicide, and other forms of violence against children have long been recorded, but the grave and urgent nature of this global problem has only recently been revealed.[5]

A. Hidden, unreported and under-recorded

25. Violence against children takes a variety of forms and is influenced by a wide range of factors, from the personal characteristics of the victim and perpetrator to their cultural and physical environments. However, much violence against children remains hidden for many reasons. One is fear: many children are afraid to report incidents of violence against them. In many cases parents, who should protect their children, remain silent if the violence is perpetrated by a spouse or other family member, a more powerful member of society such as an employer, a police officer, or a community leader. Fear is closely related to the stigma frequently attached to

[5] A. Reza, J. A. Mercy and E. Krug, "Epidemiology of violent deaths in the world", *Injury Prevention*, vol. 7 (2002), pp. 104-111; Krug, op. cit. at note 1, pp. 59-86.

reporting violence, particularly in places where family "honour" is placed above the safety and well-being of children. In particular, rape or other forms of sexual violence can lead to ostracism, further violence, or death.

26. Societal acceptance of violence is also an important factor: both children and perpetrators may accept physical, sexual and psychological violence as inevitable and normal. Discipline through physical and humiliating punishment, bullying and sexual harassment are frequently perceived as normal, particularly when no "visible" or lasting physical injury results. The lack of an explicit legal prohibition of corporal punishment reflects this. According to the Global Initiative to End All Corporal Punishment of Children, at least 106 countries do not prohibit the use of corporal punishment in schools, 147 countries do not prohibit it within alternative care settings, and as yet only 16 countries have prohibited its use in the home.[6]

27. Violence is also invisible because there are no safe or trusted ways for children or adults to report it. In some parts of the world, people do not trust police, social services or others in authority; in others, particularly rural areas, there is no accessible authority to which one can report.[7] Where data are collected they are not always recorded in a complete, consistent or transparent way. In particular, little data are available about violence within care and detention institutions in most parts of the world because, although incidents may be documented, most institutions are not required to register and disclose this information — even to the parents of the children concerned.

B. Emerging picture

28. A variety of initiatives ranging from international statistical analysis to action research at local level provide a clearer picture of the magnitude and pervasive nature of the problem. Data generated by these initiatives indicate that while some violence is unexpected and isolated, the majority of violent acts experienced by children is perpetrated by people who are part of their lives: parents, schoolmates, teachers, employers, boyfriends or girlfriends, spouses and partners. The following examples show the range of violence against children:

- WHO has estimated, through the use of limited country-level data, that almost 53,000 children died worldwide in 2002 as a result of homicide [8]
- Studies from many countries in all regions of the world suggest that up to 80 to 98 per cent of children suffer physical punishment in their homes, with a third or more experiencing severe physical punishment resulting from the use of implements.

[6] Global Initiative to End All Corporal Punishment of Children, *Global Summary of the Legal Status of Corporal Punishment of Children*, 28 June 2006.

[7] *Multi-Country Study on Women's Health and Domestic Violence* (Geneva, World Health Organization, 2005).

[8] *Global Estimates of Health Consequences due to Violence against Children*. Background paper for the United Nations Study on Violence against Children (Geneva, World Health Organization, 2006).

- Reporting on a wide range of developing countries, the Global School-based Health Survey recently found that between 20 and 65 per cent of school-aged children reported having been verbally or physically bullied in the past 30 days.[9] Bullying is also frequent in industrialized countries.[10]

- WHO estimates that 150 million girls and 73 million boys under 18 experienced forced sexual intercourse or other forms of sexual violence during 2002.[11]

- According to a WHO estimate, between 100 and 140 million girls and women in the world have undergone some form of female genital mutilation/cutting.[12] Estimates from UNICEF published in 2005 suggest that in sub-Saharan Africa, Egypt and the Sudan, 3 million girls and women are subjected to genital mutilation/cutting every year.[13]

- Recent ILO estimates indicate that, in 2004, 218 million children were involved in child labour, of whom 126 million were in hazardous work.[14] Estimates from 2000 suggest that 5.7 million were in forced or bonded labour, 1.8 million in prostitution and pornography, and 1.2 million were victims of trafficking.[15] However, compared with estimates published in 2002, the incidence of child labour has diminished by 11 per cent and 25 per cent fewer children were found working in hazardous occupations.[16]

C. Risk and protective factors

29. Economic development, status, age, sex and gender are among the many factors associated with the risk of lethal violence. WHO estimates suggest that the rate of homicide of children in 2002 was twice as high in low-income countries than high-income countries (2.58 v. 1.21 per 100,000 population). The highest child homicide rates occur in adolescents, especially boys, aged 15 to 17 years (3.28 for

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[9] Analysis provided to the Study by the Global School-based Health Survey: The World Health Organization (http://www.cdc.gov/gshs or http://www.who.int/school_youth_health/gshs) using data from surveys conducted from 2003 to 2005 for Botswana, Chile (metropolitan areas), China (Bejing), Guyana, Jordan, Kenya, Lebanon, Namibia, Oman, the Phillippines, Swaziland, Uganda, the United Arab Emirates, Venezuela (Lara), Zambia and Zimbabwe (Harare).

[10] C. Currie et al., *Health Behaviour in School-Aged Children (HBSC) Study: international report from the 2001/2002 survey*. Health Policy for Children and Adolescents, No. 4 (Geneva, World Health Organization, 2004).

[11] *Global Estimates of Health Consequences due to Violence against Children*, op. cit. at note 8, based on estimates by G. Andrews et al., Child sexual abuse, chapter 23 in M. Ezzati et al., (*2004*) *Comparative Quantification of Health Risks: Global and regional burden of disease attributable to selected major risk factors* (Geneva, World Health Organization, 2004), vol. 2, pp. 1851-1940, and using data of the Population Division of the United Nations Department of Economic and Social Affairs for population under 18 years.

[12] *Changing a Harmful Social Convention: Female Genital Mutilation/Cutting, Innocenti Digest No. 12* (Florence, UNICEF Innocenti Research Centre, 2005).

[13] Ibid.

[14] *The End of Child Labour: Within Reach. Global Report* (Geneva, International Labour Office, 2006).

[15] *A Future Without Child Labour. Global Report* (Geneva, International Labour Office, 2002).

[16] *Global Trends in Child Labour 2000-2004*. International Programme on the Elimination of Child Labour (IPEC) and Statistical Information and Monitoring Programme on Child Labour (SIMPOC) (Geneva, International Labour Office, 2006).

girls, 9.06 for boys) and among children 0 to 4 years old (1.99 for girls, 2.09 for boys).[17]

30. Studies suggest that young children are at greatest risk of physical violence, while sexual violence predominantly affects those who have reached puberty or adolescence. Boys are at greater risk of physical violence than girls, while girls face greater risk of sexual violence, neglect and forced prostitution.[18] Social and cultural patterns of conduct and stereotyped roles and socioeconomic factors such as income and education also play an important role.

31. Small-scale studies reveal that some groups of children are especially vulnerable to violence. These include children with disabilities, those from ethnic minorities and other marginalized groups, "street children" and those in conflict with the law, and refugee and other displaced children.

32. Growing income inequality, globalization, migration, urbanization, health threats, in particular the HIV/AIDS pandemic, technological advances and armed conflict, affect how we treat children. Addressing these challenges, as well as reaching internationally agreed objectives, such as the Millennium Development Goals, will aid the elimination of violence against children.

33. In the same way that some factors increase the susceptibility of children to violence, there are also factors that may prevent, or reduce the likelihood of violence. Although more research is needed on these protective factors, it is clear that stable family units can be a powerful source of protection from violence for children in all settings.

34. Factors that are likely to be protective in the home as well as other settings include good parenting, the development of strong attachment bonds between parents and children and positive non-violent discipline. Factors that are likely to protect against violence at school include school-wide policies and effective curricula that support the development of non-violent and non-discriminatory attitudes and behaviours. High levels of social cohesion have been shown to have a protective effect against violence in the community, even when other risk factors are present.

35. Research has identified several factors that appear to facilitate resilience in children who have experienced violence.[19] These resilience factors include secure attachment of the child to an adult family member, high levels of paternal care during childhood, a warm and supportive relationship with a non-abusing parent; as well as supportive relationships with peers who do not engage in substance abuse or criminal behaviour.

D. A wide range of impacts

36. Although the consequences of violence for children may vary according to its nature and severity, the short- and long-term repercussions are very often grave and

[17] *Global Estimates of Health Consequences due to Violence against Children*, op. cit. at note 8.

[18] Krug, op. cit. at note 1.

[19] *Preventing child maltreatment: a guide to taking action and generating evidence* (Geneva, World Health Organization and International Society for Prevention of Child Abuse and Neglect, 2002).

damaging. Violence may result in greater susceptibility to lifelong social, emotional, and cognitive impairments and to health-risk behaviours,[20] such as substance abuse and early initiation of sexual behaviour.[21] Related mental health and social problems include anxiety and depressive disorders, hallucinations, impaired work performance, memory disturbances, as well as aggressive behaviour. Early exposure to violence is associated with later lung, heart and liver disease, sexually transmitted diseases and foetal death during pregnancy, as well as later intimate partner violence and suicide attempts.[22]

37. There is little information available about the global economic costs of violence against children in particular from the developing world. However, the variety of short- and long-term consequences associated with violence against children suggests that the economic costs to society are significant. The financial costs associated with child abuse and neglect, including future lost earnings and mental health care, were estimated in the United States in 1996 at US$ 12.4 billion.[23]

III. Settings in which violence against children occurs

A. Home and family

38. The family is the natural fundamental group unit of society, as proclaimed by article 16 of the Universal Declaration of Human Rights and articles 10 and 23 of the International Covenants on Economic, Social and Cultural Rights and on Civil and Political Rights, respectively. A basic assumption of the Convention on the Rights of the Child, contained in its preamble, is that the family is the natural environment for the growth and well-being of all its members — and particularly children — thereby recognizing that the family has the greatest potential to protect children and provide for their physical and emotional safety. The privacy and autonomy of the family are valued in all societies and the right to a private and family life, a home and correspondence is guaranteed in international human rights instruments.[24] Eliminating and responding to violence against children is perhaps most challenging in the context of the family, considered by most as the most "private" of private spheres. However, children's rights to life, survival, development, dignity and physical integrity do not stop at the door of the family home, nor do States' obligations to ensure these rights for children.

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[20] V. J. Felitti et al., "Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study", *American Journal of Preventive Medicine*, vol. 14 (1998), pp. 245-258.

[21] Centers for Disease Control and Prevention, *Adverse Childhood Experiences Study* (Atlanta, National Centers for Injury Prevention and Control, Centers for Disease Control and Prevention, 2006). Available at http://www.cdc.gov/NCCDPHP/ACE.

[22] See previous footnote. Also see Panel on Research on Child Abuse and Neglect, Commission on Behavioural and Social Sciences and Education, National Research Council, *Understanding Child Abuse and Neglect* (Washington, D.C., National Academy Press, 1999).

[23] *Report of the Consultation on Child Abuse Prevention 29-31 March 1999* (Geneva, World Health Organization, 1999) (WHO/HSC/PVI/99.1), cited in Krug, op. cit. at note 1, p. 70.

[24] See, for example, article 8 of the Convention for the Protection of Human Rights and Fundamental Freedoms, and article 17 of the International Covenant on Civil and Political Rights.

39. The prevalence of violence against children by parents and other close family members — physical, sexual and psychological violence, as well as deliberate neglect — has been acknowledged and documented in recent decades. From early infancy until 18 years of age, children are vulnerable to various forms of violence within their homes. Perpetrators vary according to the age and maturity of the victim and may include parents, step-parents, foster parents, siblings, other family members and carers.

40. Most physical violence against children in the family is not fatal, nor does it cause permanent or serious visible physical injury. However, some violence against very young children in the family causes permanent damage and even death, although perpetrators may not aim to cause such harm. Research from various countries indicates that the "shaken baby syndrome" — the abuse of small children by shaking — is frequently related to head injuries and severe brain injury.[25]

41. Violence against children in the family may frequently take place in the context of discipline and takes the form of physical, cruel or humiliating punishment.[26] Harsh treatment and punishment in the family are common in both industrialized and developing countries. Children, as reported in studies and speaking for themselves during the Study's regional consultations, highlighted the physical and psychological hurt they suffer as a result of these forms of treatment and proposed positive and effective alternative forms of discipline.[27]

42. Physical violence is often accompanied by psychological violence. Insults, name-calling, isolation, rejection, threats, emotional indifference and belittling are all forms of violence that can be detrimental to a child's psychological development and well-being — especially when it comes from a respected adult such as a parent. It is of critical importance that parents be encouraged to employ exclusively non-violent methods of discipline.

43. Neglect, including a failure to meet children's physical and emotional needs, protect them from danger, or obtain medical or other services when needed contributes to mortality and morbidity in young children. The imbalance in the sex ratio between girls and boys in some regions suggests that girls are at particular risk of neglect, as well as violence. Disability also increases the risk of neglect. Disabled children may be abandoned, a practice which may sometimes be accepted and encouraged.[28]

44. The occurrence of sexual violence in the home is increasingly acknowledged. An overview of studies in 21 countries (mostly developed) found that 7-36 per cent of women and 3-29 per cent of men reported sexual victimization during childhood,

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[25] O. Flodmark, O. "Imaging in battered children", *Rivista di Neuroradiologia, vol. 17* (2004), pp. 434-436.

[26] United Nations Secretary-General's Study on Violence against Children website (http://www.violencestudy.org/r27) and J. E. Durrant "Corporal punishment: prevalence, predictors and implications for child behaviour and development", in S. N. Hart (ed.), *Eliminating Corporal Punishment* (Paris, UNESCO, 2005), pp. 52-53.

[27] International Save the Children Alliance, *Ending Physical and Humiliating Punishment of Children — Making it Happen, Part 1*. Submission to the United Nations Secretary-General's Study on Violence against Children (Stockholm, Save the Children Sweden, 2005). Available at the Regional Consultations website www.violencestudy.org/europe-ca/.

[28] United Nations Secretary-General's Study on Violence against Children, *Regional Desk Review: Violence against Children in West and Central Africa*, 2005, p. 11.

and the majority of studies found girls to be abused at 1.5-3 times the rate for males. Most of the abuse occurred within the family circle.[29] Similarly, a multi-country study by WHO, including both developed and developing countries, showed that between 1 and 21 per cent of women reported to have been sexually abused before the age of 15, in most cases by male family members other than the father or stepfather.[30]

45. Absence of legally established minimum ages for sexual consent and marriage in some countries may expose children to partner violence. Eighty-two million girls are estimated to marry before age 18.[31] A significant number are married at much younger ages, frequently coercively, and face a high risk of violence, including forced sex.

46. Harmful traditional practices affect children disproportionately and are generally imposed on them at an early age by their parents or community leaders. According to the Special Rapporteur on traditional practices affecting the health of women and the girl child, female genital mutilation, which, according to WHO, is carried out on increasingly younger girls, is prevalent in Africa, and also occurs in some parts of Asia and within immigrant communities in Europe, Australia, Canada and the United States of America.[32] Other harmful traditional practices affecting children include binding, scarring, burning, branding, violent initiation rites, fattening, forced marriage, so-called "honour" crimes and dowry-related violence, exorcism, or "witchcraft".

47. Between 133 and 275 million children worldwide are estimated to witness domestic violence annually.[33] The exposure of children to violence in their homes on a frequent basis, usually through fights between parents or between a mother and her partner, can severely affect a child's well-being, personal development and social interaction in childhood and adulthood.[34] Intimate partner violence also increases the risk of violence against children in the family, with studies from China, Colombia, Egypt, Mexico, the Philippines and South Africa showing a strong

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[29] D. Finkelhor (1994) "The international epidemiology of child sexual abuse", *Child Abuse & Neglect*, vol. 18, No. 5 (2005), pp. 409-417.

[30] *Multi-Country Study on Women's Health and Domestic Violence*, op. cit. at note 7.

[31] J. Bruce, "Married adolescents girls: human rights, health and development needs of a neglected majority", paper presented by the Population Council at the Supporting Event: Early Marriage in a Human Rights Context, United Nations Special Session on Children, 8-10 May 2002.

[32] The Sub-Commission on the Promotion and Protection of Human Rights, the main subsidiary body of the former Commission on Human Rights, has studied several thematic issues relating to the question on violence against children in the last few years. The Special Rapporteur on traditional practices affecting the health of women and the girl child, Halima Embarek Warzazi, has particularly focused on the elimination of female genital mutilation (FGM). See, for example, her ninth and final report on the situation regarding the elimination of traditional practices affecting the health of women and the girl child (E/CN.4/Sub.2/2005/36).

[33] Estimate based on United Nations Population Division data for global population under 18 years for 2000 and domestic violence studies from 1987 to 2005. *Behind Closed Doors: The Impact of Domestic Violence on Children* (London: UNICEF and The Body Shop International Plc., 2006).

[34] L. A. McClosky, A. J. Figueredo and M. P. Koss, "The effect of systemic family violence on children's mental health", *Child Development*, vol. 66: (1995), pp. 239-1261 cited in Krug, op. cit. at note 1, p. 103; and S. R. Dube et al., "Exposure to abuse, neglect, and household dysfunction among adults who witnessed intimate partner violence as children: implications for health and social services" *Violence and Victims*, vol. 17, No. 1 (2002), pp. 3-17.

relationship between violence against women with violence against children.[35] A study from India found that domestic violence in the home doubled the risk of violence against children.[36]

B. Violence in schools and educational settings

48. In most countries, children spend more time in the care of adults in educational settings than anywhere else outside of their homes. Schools have an important role in protecting children from violence. Adults who oversee and work in educational settings have a duty to provide safe environments that support and promote children's dignity and development.

49. For many children educational settings expose them to violence and may teach them violence. The public perception of violence in schools has been coloured by the media's focus on extreme events involving shooting and kidnapping of schoolchildren. However, death and serious injuries due to violence are less likely to happen to children in schools than in their homes or the wider community.

50. Violence perpetrated by teachers and other school staff, with or without the overt or tacit approval of education ministries and other authorities that oversee schools, includes corporal punishment, cruel and humiliating forms of psychological punishment, sexual and gender-based violence, and bullying. Corporal punishment such as beating and caning is standard practice in schools in a large number of countries. The Convention on the Rights of the Child requires States parties to take all appropriate measures to ensure that school discipline is administered in a manner consistent with the Convention. The Global Initiative to End All Corporal Punishment of Children reports that 102 countries have banned corporal punishment in school, but enforcement is uneven.[37]

51. Violence in schools in the form of playground fighting and bullying of students also occurs.[38] In some societies, aggressive behaviour, including fighting, is widely perceived as a minor disciplinary problem. Bullying is frequently associated with discrimination against students from poor families or ethnically marginalized groups, or those with particular personal characteristics (e.g. appearance, or a physical or mental disability). Bullying is most commonly verbal, but physical violence also occurs. Schools are also affected by events in the wider community, for example, increased incidence of gang culture and gang-related criminal activity, particularly related to drugs.[39]

52. Sexual and gender-based violence also occurs in educational settings. Much is directed against girls, by male teachers and classmates. Violence is also increasingly directed against lesbian, gay, bisexual and transgendered young people in many States and regions. Sexual and gender-based violence is facilitated by Government's

[35] Krug, op. cit. at note 1, p. 68.

[36] W. M. Hunter et al., "Risk factors for severe child discipline practices in rural India", *Journal of Paediatric Psychology I*, vol. 25 (2000), pp. 435-447.

[37] *Global Summary of the Legal Status of Corporal Punishment of Children*, op. cit. at note 6.

[38] D. Olweus, D. *Bullying at School: What We Know and What We Can Do* (Oxford, Blackwell, 1993).

[39] United Nations Secretary-General's Study on Violence against Children, *Regional Consultation Outcome Report: Caribbean*, Port of Spain, March 2005.

failure to enact and implement laws that provide students with explicit protection from discrimination.

C. Violence in care and justice systems

53. Millions of children, particularly boys, spend substantial periods of their lives under the control and supervision of care authorities or justice systems, and in institutions such as orphanages, children's homes, care homes, police lock-ups, prisons, juvenile detention facilities and reform schools.[40] These children are at risk of violence from staff and officials responsible for their well-being. Corporal punishment in institutions is not explicitly prohibited in a majority of countries.

54. Overcrowding and squalid conditions, societal stigmatization and discrimination, and poorly trained staff heighten the risk of violence. Effective complaints, monitoring and inspection mechanisms, and adequate government regulation and oversight are frequently absent. Not all perpetrators are held accountable, creating a culture of impunity and tolerance of violence against children. The impact of institutionalization goes beyond the experience by children of violence. Long-term effects can include severe developmental delays, disability, irreversible psychological damage, and increased rates of suicide and recidivism.

55. As many as 8 million of the world's children are in residential care.[41] Relatively few are in such care because they have no parents, but most are in care because of disability, family disintegration, violence in the home, and social and economic conditions, including poverty.

56. Violence by institutional staff, for the purpose of "disciplining" children, includes beatings with hands, sticks and hoses, and hitting children's heads against the wall, restraining children in cloth sacks, tethering them to furniture, locking them in freezing rooms for days at a time and leaving them to lie in their own excrement.[42]

57. In residential institutions, children with disabilities may be subject to violence in the guise of treatment. In some cases children as young as nine are subjected to electroconvulsive treatment (ECT) without the use of muscle relaxants or anaesthesia.[43] Electric shocks may also be used as "aversion treatment" to control children's behaviour. Drugs may be used to control children's behaviour and make

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[40] Please note that the situation of other children in State custody, including refugee and migrant children, as well as the situation of children in peacetime armies is addressed in detail in the in-depth study on violence.

[41] D. Tolfree, *Roofs and Roots: The Care of separated children in the developing world* (London, Save the Children UK, 1995) cited in International Save the Children Alliance, *A Last Resort: The Growing Concern about Children in Residential Care* (London, Save the Children UK, 2003), p. 15.

[42] United Nations Secretary-General's Study on Violence against Children Regional Desk Review: Middle East and North Africa Region (2005), p. 19; Mental Disability Rights International, *Hidden Suffering: Romania's Segregation and Abuse of Infants and Children with Disabilities*. (Washington, D.C., Mental Disability Rights International, 2006).

[43] Mental Disability Rights International, *Behind Closed Doors: Human Rights Abuses in the Psychiatric Facilities, Orphanages and Rehabilitation Centres of Turkey* (Washington, D.C., Mental Disability Rights International, 2005).

them more "compliant", leaving them less able to defend themselves against violence.[44]

58. Neglect is also a feature of many residential institutions where conditions are so poor that they put the health and lives of children at risk. In many facilities for children with disabilities, there is no access to education, recreation, rehabilitation or other programmes. Children with disabilities are often left in their beds or cribs for long periods without human contact or stimulation. This can lead to severe physical, mental and psychological damage.

59. Children in residential care are vulnerable to violence from other children, particularly when conditions and staff supervision are poor and older, more aggressive children are not separated from younger or more vulnerable ones. Staff may sometimes sanction or encourage peer abuse among children.

60. Although prohibited by the International Covenant on Civil and Political Rights and the Convention on the Rights of the Child, some countries still impose the death sentence for crimes committed by those under 18. Currently, at least 31 countries permit corporal punishment in sentencing children for crimes,[45] which in some countries may include caning, flogging, stoning or amputation.

61. Despite the obligation to ensure that the detention of children shall be used only as a measure of last resort and for the shortest appropriate period of time contained in article 37 of the Convention on the Rights of the Child, it was estimated in 1999 that 1 million children are deprived of their liberty.[46] Most of these are charged with minor or petty crimes, and are first-time offenders. Many are detained because of truancy, vagrancy or homelessness. In some countries, the majority of children in detention have not been convicted of a crime, but are awaiting trial.[47]

62. Children in detention are frequently subjected to violence by staff, including as a form of control or punishment, often for minor infractions. In at least 77 countries corporal and other violent punishments are accepted as legal disciplinary measures in penal institutions.[48] Children may be beaten, caned, painfully restrained, and subjected to humiliating treatment such as being stripped naked and caned in front of other detainees. Girls in detention facilities are at particular risk of physical and sexual abuse, mainly when supervised by male staff.[49]

63. In keeping with the provisions of the Convention on the Rights of the Child, national legislation in most countries requires separate facilities for children in conflict with the law in order to prevent abuse and exploitation by adults. Yet detention with adults is routine in many countries. Children in detention are also at

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[44] United Nations Secretary-General's Study on Violence against Children. Summary report, thematic meeting on violence against disabled children, 28 July 2005 (New York, UNICEF, 2005), p. 18.

[45] *Global Summary of the Legal Status of Corporal Punishment of Children*, op. cit. at note 6.

[46] G. Cappelaere and A. Grandjean, *Enfants privés de liberté. Droits et réalités*. (Liège, Editions Jeunesse et Droit, 2000).

[47] F. Martin and J. Parry-Williams, *The Right Not to Lose Hope* (London, Save the Children UK, 2005).

[48] *Global Summary of the Legal Status of Corporal Punishment of Children*, op. cit. at note 6.

[49] Report of the Special Rapporteur on violence against women on the mission to the United States of America on the issue of violence against women in state and federal prisons (E/CN.4/1999/68/Add.2), paras. 55 and 58.

heightened risk of self-harm or suicidal behaviour, particularly in cases of prolonged or indefinite detention, isolation, or when detained in adult facilities.

> *Sometimes one day in prison felt like a year. But after 10 days you get used to it and you don't cry as much.*
>
> Boy, Middle East

D. Violence in work settings

64. There are little data on violence against child workers, especially those in the informal sector.[50] International standards, such as ILO Convention No. 138 (1973) concerning Minimum Age for Admission to Employment preclude children under the minimum age of employment from being in the workplace. Across all regions, violence — physical, sexual and psychological — affects many millions of children who are working, both legally and illegally. It may be used to coerce children to work, or punish or control them within the workplace. Some categories of illegal work have been identified as the "worst forms of child labour" and therefore constitute violence against children.

65. Information on acts of workplace violence against children suggests that most cases are inflicted by "employers", although perpetrators may also include co-workers, clients, foremen, customers, police, criminal gangs and, in the case of sexual exploitation, pimps.

66. The largest employment category for girls under 16 is domestic work[51] which often takes the form of unregulated employment and exploitation, and sometimes servitude or slavery.[52] Several countries have designated it a "worst form" of child labour under ILO Convention No. 182 (1999) concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour.[53] Child workers report maltreatment such as physical punishment, humiliation and sexual harassment, and child domestic workers report being consistently humiliated.[54] Most physical and psychological violence against child domestic workers is perpetrated by women (generally employers), but girls are often subject to sexual violence from male members of the family of their employer.[55]

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[50] United Nations Secretary-General's Study on Violence against Children Regional Desk Review: East Asia and the Pacific (2005); ibid.: Middle East and North Africa (2005); ibid.: Latin America (2005).

[51] *Child Labour: Targeting the Intolerable*. Report submitted to the 86th Session of the International Labour Conference (Geneva, International Labour Office, 1998).

[52] *Abuses Against Child Domestic Workers in El Salvador*, Human Rights Watch, vol. 16, No. 1(B) (2004); *Always on Call: Abuse and Exploitation of Child Domestic Workers in Indonesia*, Human Rights Watch, vol. 17, No. 7(C) (2005); Human Rights Watch, *Inside the Home, Outside the Law: Abuse of child domestic workers in Morocco*, Human Rights Watch, vol. 17, No. 12(E) (2005); and T. Blanchet, *Lost Innocence, Stolen Childhood* (Dhaka, University Press Limited, 1998).

[53] *Helping Hands or Shackled Lives? Understanding Child Domestic Labour and Responses To It* (Geneva, International Labour Organization/International Programme on the Elimination of Child Labour, 2004).

[54] *Child domestic workers: A handbook on good practice in programme interventions* (London, Anti-Slavery International, 2005), pp. 5-6.

[55] J. Blagbrough, "Violence against child domestic workers". Anti-Slavery International paper presented at a Save the Children workshop, Thailand, September 2003.

67. The exploitation of children under 18 in prostitution, child pornography and similar activities constitutes violence.[56] It is estimated that 1 million children enter these sectors every year.[57] Many are coerced, kidnapped, sold and deceived into these activities, or are victims of trafficking. In addition to the sexual violence which is intrinsic to child prostitution, girls and boys in prostitution and related areas frequently suffer physical and psychological violence, as well as neglect. They are often unable to seek help,[58] and when they do so may be treated as criminals, deprived of liberty and provided with limited redress.

68. Bonded labour of children is a feature of many parts of the world. Children in forced and bonded labour are rarely able to protect themselves from employers and other workers, and studies and children's testimonies suggest that all forms of violence are endemic in forced and bonded labour. Violence also affects the tens of thousands of children in traditional forms of slavery, which still exist in some parts of the world.

E. Violence in the community

69. The community is a source of protection and solidarity for children, but it can also be a site of violence, including peer violence, violence related to guns and other weapons, gang violence, police violence, physical and sexual violence, abductions and trafficking. Violence may also be associated with the mass media, and new information and communications technology. Older children are at greatest risk of violence in the community, and girls are at increased risk of sexual and gender-based violence.

70. For some children, the journey to and from school may be their first independent exposure to the community; it may also be their first exposure to its risks. Others are exposed to violence when carrying out domestic tasks, such as when fetching water, fuel, food or fodder for animals. These tasks, which may involve walking considerable distances, are usually assigned to girls in rural areas of the developing world.[59]

71. A sudden, steep increase is noticeable in the rates of violence (both victimization and perpetration), particularly among boys at around age 15, indicating that a number of factors come together at adolescence to make peer violence more common. Available data indicate that in most parts of the world, homicide rates among boys aged 15 to 17 are at least three times greater than among boys aged 10 to 14. This sudden increase in violence among children older than 15 years occurs even in regions with low overall homicide rates and implies that

[56] For a full definition of the commercial sexual exploitation of children, see the Declaration of the World Congress Against the Commercial Sexual Exploitation of Children, Stockholm, June 1996. Available online: http://www.csecworldcongress.org/.

[57] *Profiting from Abuse. Report into children in commercial sexual exploitation* (New York, UNICEF, 2001), p. 20.

[58] Child Workers in Nepal Concerned Centre, *A Situational Analysis of Child Sex Tourism in Nepal (Kathmandu Valley and Pokhara)* (2003), p. 27; International Save the Children Alliance, *10 Essential Learning Points: Listen and Speak out against Sexual Abuse of Girls and Boys. Global Submission to the U.N. Study on Violence against Children* (Oslo, Save the Children, 2005), p. 58.

[59] *Every Girl Counts. Development, Justice and Gender. Girl Child Report* (Ontario, World Vision Canada, 2001), p. 17; UNICEF Somalia, *From perception to reality: A study on child protection in Somalia* (Nairobi, UNICEF, 2003).

measures to curtail violent behaviour are critical before, and in, the early and mid-teens.[60]

72. Physical violence between peers tends to be more common in urban areas characterized by lack of employment, education and social amenities and low standards of housing, where youthful and rapidly growing populations express frustration, anger and pent-up tension in fights and anti-social behaviour. Much of the violence involves personal disputes between friends and acquaintances, and is strongly associated with the use of drugs and alcohol. Where guns and other weapons are available, fights often lead to severe injuries and death. Gender differences in adolescent homicide rates suggest that male socialization and norms of masculinity contribute to violence. In Brazil the rates among boys are four to six times those among girls.[61]

73. Police brutality and lack of access to justice often exist in communities deeply affected by violence.[62] In some countries organized crime and gang violence has led Governments to adopt strong repressive measures against those groups. When these measures are not associated with a consistent prevention strategy, a reliable data system and full respect for human rights, risks of violence may heighten. Increased punitive measures, including large-scale detention of supposed gang members, associated with arbitrary, inefficient and violent law enforcement further contributes to the stigmatization of poor youth and the rising violence.

74. Studies of non-fatal physical violence reveal that for every youth homicide there are around 20 to 40 victims of non-fatal youth violence requiring hospital treatment. As with homicide, rates of non-fatal violent victimization are higher among males than females.[63]

75. Children are vulnerable to sexual violence and exploitation from members of the community. Sexual violence is more commonly perpetrated by someone known to the child such as family members or adults in positions of trust (such as sports coaches, clergy, police, teachers and employers), but it is also perpetrated by people whom the child does not know.[64] Recent research shows that violence is frequently a feature of adolescent relationships. Preliminary results from the ongoing Global School-based Health Survey, conducted among students 13 to 15 years old, shows significant levels of physical violence within dating relationships. Asked if they had been hit, slapped or hurt on purpose by a boyfriend or girlfriend in the past 12 months, 15 per cent of girls and 29 per cent of boys in Jordan responded "yes", as did 9 per cent of girls and 16 per cent of boys in Namibia, 6 per cent of girls and 8 per cent of boys in Swaziland, and 18 per cent of girls and 23 per cent of boys in Zambia.[65]

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[60] *Global Estimates of Health Consequences due to Violence against Children*, op. cit. at note 8.

[61] *Impacto da violência na saúde dos brasileiros* (Brasília, Ministério da Saúde, 2005); *Saúde Brasil 2004: uma análise da situação de saúde* (Brasília, Ministério da Saúde, 2004); *Firearm-related violence in Brazil* (São Paulo, Núcleo de Estudos da Violência, Universidade de São Paulo, 2004).

[62] *Easy Targets: Violence against children worldwide* (New York, Human Rights Watch, 2001).

[63] Krug , op. cit. at note 1, p. 27.

[64] *10 Essential Learning Points*, op. cit. at note 58, p. 22.

[65] Analysis provided to the Study by the Global School-based Health Survey: The World Health Organization, op. cit. at note 9.

76. Community violence affects marginalized groups of children. Violence by police against street children — from verbal harassment and beatings to rape and other sexual violence, torture and "disappearance" — is a common theme in the study reviews and consultations. Children from all regions report cruel and gratuitous violence by police for petty offences.[66]

77. Accessible and affordable tourism has brought with it sex tourism, which often involves the victimization of children. The Internet and other developments of communication technologies also appear to be associated with an increased risk of sexual exploitation of children, as well as other forms of violence.

78. Refugee and other displaced children experience significant violence. Research on refugees in Africa cites the lack of safety in public spaces as a risk for sexual and gender-based violence, most of it against girls.[67] Many camps lack secure buildings, regular law enforcement, sanctuary for survivors of attack, and means of reporting and redress.[68] In the cases of forced displacement, women and girls in particular can be exposed to protection problems related to their sex, gender issues, including their cultural and socio-economic position, and their legal status, which means that they may be less likely than men and boys to be able to exercise their rights.

79. Trafficking in human beings, including children, within countries and across international borders is a major international concern. The phenomenon is complex, arising from the interaction of poverty, labour migration, conflict, or political unrest resulting in population displacement.[69] Trafficking can involve multiple forms of violence: abduction or deception by recruiters in their transactions with children, their parents or other carers, sexual violence which affects trafficking victims as they are transferred to their destination,[70] and being held captive, frequently accompanied by violence while waiting for "job" placement. Most victims are trafficked into violent situations: prostitution, forced marriage, and domestic or agricultural work in conditions of slavery, servitude or debt bondage.

80. The mass media sometimes portray as normal or glorify violence, including violence against children, in print and visual media including television programmes, films and video games.[71] The Internet has also stimulated the

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[66] M. Wernham, *An Outside Chance: Street Children and Juvenile Justice — An International Perspective* (London, Consortium for Street Children, 2004).

[67] *Darfur: women raped even after seeking refuge; donors must increase support to victims of sexual violence*. Human Rights Watch, press release, 11 April 2005; *Lives blown apart: Crimes against women in times of conflict* (London, Amnesty International, 2004); A. C. Okot, I. Amony and G. Otim, *Suffering in Silence: A Study of Sexual and Gender Based Violence* (SGBV) in Pabbo Camp, Gulu District, Northern Uganda (New York, UNICEF, 2005); J. Gardner and J. El Bushra, *Somalia, The Untold Story: The War through the eyes of Somali Women* (London, CIIR and Pluto Press, 2004).

[68] USAID, *Draft — Linking Gender-based Violence Research to Practice in East, Central and Southern Africa: A Review of Risk Factors and Promising Interventions*. The Policy Project, 2006.

[69] *Trafficking in human beings, especially women and children, in Africa* (2nd edition) (Florence, UNICEF Innocenti Insight, 2004).

[70] *Trafficking for sexual exploitation and other exploitative practices. Innocenti Insight* (Florence, UNICEF Innocenti Research Centre, 2005).

[71] United Nations Secretary-General's Study on Violence against Children Regional Desk Review: North America (2005).

production, distribution and use of materials depicting sexual violence against children. The Internet has been used for online solicitation or "grooming" (securing children's trust in order to draw them into a situation where they may be harmed). It also exposes children to violent or pornographic materials, as well as harassment and intimidation, including bullying, by adults and other children.[72] Surveys in Canada and the United Kingdom suggest that large numbers of schoolchildren have been harassed, bullied or victimized through e-mail or mobile phones, or have had someone publish misleading information about them online.[73] Children's access to and use of the Internet is more difficult to control than their use of print media, television and films.

IV. Progress achieved

81. The analysis of government responses to my study questionnaire and the concluding observations of the Committee on the Rights of the Child indicate that numerous initiatives have been developed by Governments and others to prevent and respond to the various forms of violence against children that I refer to above.

82. The accumulated experience and knowledge of States and international organizations in developing and implementing prevention and response initiatives were also presented at the regional consultations, thereby attesting to every country's capability to respond to this grave challenge.

83. One hundred and ninety-two States have ratified the Convention on the Rights of the Child, and there has been broad ratification of the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography, and the Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict. Since that Convention has come into force, other important instruments have also been adopted and have entered into force with a significant number of ratifications. ILO Convention No. 182 was adopted in 1999 and the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime in 2000.

84. Many initiatives have been implemented and concrete action taken on the basis of these legal instruments. For example, ILO Convention No. 182 has led to new or amended labour laws and national plans of action providing new tools for the elimination of the worst forms of child labour. Progress has also been made in prohibiting and addressing trafficking in children by anti-trafficking laws and strengthened bilateral and multilateral cooperation with countries of origin and transit.

85. Responses to my questionnaire suggest that action to address violence against children has been predominantly legislative. States have enacted legislation addressing issues relating to violence against children and some have harmonized their domestic legislation with the Convention, its Optional Protocols and other treaties. However, legal reforms have often focused on narrow, albeit important,

[72] ECPAT, *Violence against Children in Cyberspace*. Resource report for the United Nations Secretary-General's Study on Violence against Children (2005).

[73] T. Beran and Li Q, "Cyber-Harassment: A Study of a New Method for an Old Behavior", *Journal of Educational Computing Research*, vol. 32, No. 3 (2005), pp. 265-277.

issues rather than taking a comprehensive approach to violence against children. Few States have carried out a thorough review of the legal framework so that it can address violence against children more effectively, and implementation of laws, including legal reforms, remains a challenge.

86. In many States, legislation addressing violence against children concentrates on sexual or physical violence and does not take account of psychological violence. Protection and penalties are focused on, while recovery, reintegration and redress receive much less attention. Prevention is also perceived by some States to be addressed simply through the protection and penalty aspects of legislation.

87. Responses to my questionnaire also highlight the formulation of national action plans, programmes and policies relating to violence against children. These often focus on sexual exploitation and trafficking of children. Several States have created structures, including juvenile or family courts, to address child protection and other child-related concerns. Many States also reported that advocacy, awareness-raising and training initiatives on child rights and child protection issues have been carried out, with many commenting on the positive role the media play in awareness-raising, information dissemination and mobilization of society. Several States, however, touched on the harmful role that the media can play due to sensationalism, violation of the privacy of child victims of violence and exposure of children to violence.

88. While acknowledging that law implementation is uneven and that existing initiatives are, in general, insufficient, the Committee on the Rights of the Child and human rights special procedure mandate holders have also recognized the progress achieved in the protection of children from violence in all settings. In its dialogue with States parties from all regions, the Committee has identified, and noted with appreciation, the existence of good practices and positive initiatives, such as efforts to address the practice of female genital mutilation/cutting, child labour — including the elimination of its worst forms — and domestic violence against women and children. Programmes have been set up to provide assistance and services to street children, support parents and develop their parental skills, and legislation has been created aimed at prohibiting discrimination against children belonging to marginalized groups, including children with disabilities, children infected or affected by HIV/AIDS, indigenous children and children belonging to national, ethnic, religious and linguistic minorities.

89. Regional human rights protection mechanisms have also been critical in the improvement of legal standards for the protection of children from violence. The Council of Europe's human rights mechanisms, including the European Court of Human Rights and the European Committee of Social Rights, have issued important judgements and decisions on violence against children, including corporal punishment and sexual abuse. Instruments addressing trafficking in children and violence associated with new information technologies have also been developed with the Council of Europe machinery. States Members of the African Union adopted the Protocol to the African Charter on Human and Peoples' Rights relating to the Rights of Women in Africa which provides additional tools for eliminating harmful traditional practices, such as female genital mutilation. At the subregional level, in 2000 the South Asian Association for Regional Cooperation adopted a regional Convention on Preventing and Combating Trafficking in Women and Children for Prostitution.

V. Conclusions

90. Despite this progress, much remains to be done, and several factors limit the impact of measures that have been introduced or proposed with respect to violence against children. These include lack of knowledge or understanding of violence against children and its root causes, to which the dearth of data and statistics on the issue contribute. Efforts to address violence against children are frequently reactive, focusing on symptoms and consequences and not causes. Strategies tend to be fragmented, rather than integrated, and insufficient resources are allocated to measures to address the problem. In addition, international commitments to protect children from violence are often not translated into action at the national level.

91. Member States have already made commitments to protect children from all forms of violence. However, we must accept — from children's testimony during the Study process, as well as reflected in research, that these commitments are far from being fulfilled. The core message of the Study is that no violence against children is justifiable; all violence against children is preventable. There should be no more excuses. Member States must act now with urgency to fulfil their human rights obligations and other commitments to ensure protection from all forms of violence. While legal obligations lie with States, all sectors of society, all individuals, share the responsibility of condemning and preventing violence against children and responding to child victims. None of us can look children in the eye, if we continue to approve or condone any form of violence against them.

92. At the same time, the consequences of violence against children varies according to its nature and severity, and consequently efforts to prevent and respond to such violence must be multifaceted, reflecting the type of the violence, its setting and perpetrator or perpetrators, always taking into account the best interests of the child.

93. During the development of the Study I have been guided by the following principles, which are reflected in my recommendations:

(a) No violence against children is justifiable. Children should never receive less protection than adults;

(b) All violence against children is preventable. States must invest in evidence-based policies and programmes to address factors that give rise to violence against children;

(c) States have the primary responsibility to uphold children's rights to protection and access to services, and to support families' capacity to provide children with care in a safe environment;

(d) States have the obligation to ensure accountability in every case of violence;

(e) The vulnerability of children to violence is linked to their age and evolving capacity. Some children, because of gender, race, ethnic origin, disability or social status, are particularly vulnerable;

(f) Children have the right to express their views, and to have these views taken into account in the implementation of policies and programmes.

VI. Recommendations

94. My recommendations consist of a set of overarching recommendations which apply to all efforts to prevent violence against children and to respond to it if it occurs, and specific recommendations which apply to the home and family, schools and other educational settings, institutions for care or detention, the workplace and the community.

95. They are addressed primarily to States and refer to their legislative, administrative, judicial, policymaking, service delivery and institutional functions. Some recommendations are directed at other sectors of society that are also of critical importance. These include professional bodies, trade unions, research institutions, employers, and non-governmental and community-based organizations. They are also directed at parents and children.

A. Overarching recommendations

1. Strengthen national and local commitment and action

96. I recommend that all States develop a multifaceted and systematic framework to respond to violence against children which is integrated into national planning processes. A national strategy, policy or plan of action on violence against children with realistic and time-bound targets, coordinated by an agency with the capacity to involve multiple sectors in a broad-based implementation strategy, should be formulated. National laws, policies, plans and programmes should fully comply with international human rights and current scientific knowledge. The implementation of the national strategy, policy or plan should be systematically evaluated according to established targets and timetables, and provided with adequate human and financial resources to support its implementation. However, any strategy, policy, plan or programme to address the issue of violence against children must be compatible with the conditions and resources of the country under consideration.

2. Prohibit all violence against children

97. I urge States to ensure that no person below 18 years of age is subjected to the death penalty or a sentence of life imprisonment without possibility of release. I recommend that States take all necessary measures to immediately suspend the execution of all death penalties imposed on persons for crimes committed before reaching the age of 18 and take the appropriate legal measures to convert them into penalties that are in conformity with international human rights standards. The death penalty as a sentence imposed on persons for crimes committed before reaching the age of 18 should be abolished as a matter of highest priority.

98. I urge States to prohibit all forms of violence against children, in all settings, including all corporal punishment, harmful traditional practices, such as early and forced marriages, female genital mutilation and so-called honour crimes, sexual violence, and torture and other cruel, inhuman or degrading treatment or punishment, as required by international treaties, including the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment and the Convention on the Rights of the Child. I draw attention to general comment No. 8 (2006) of the Committee on the Rights of the Child on the right of the child to

protection from corporal punishment and other cruel or degrading forms of punishment (articles 19, 28, para. 2, and 37, inter alia) (CRC/C/GC/8).

3. Prioritize prevention

99. I recommend that States prioritize preventing violence against children by addressing its underlying causes. Just as resources devoted to intervening after violence has occurred are essential, States should allocate adequate resources to address risk factors and prevent violence before it occurs. Policies and programmes should address immediate risk factors, such as a lack of parent-child attachment, family breakdown, abuse of alcohol or drugs, and access to firearms. In line with the Millennium Development Goals, attention should be focused on economic and social policies that address poverty, gender and other forms of inequality, income gaps, unemployment, urban overcrowding, and other factors which undermine society.

4. Promote non-violent values and awareness-raising

100. I recommend that States and civil society should strive to transform attitudes that condone or normalize violence against children, including stereotypical gender roles and discrimination, acceptance of corporal punishment and harmful traditional practices. States should ensure that children's rights are disseminated and understood, including by children. Public information campaigns should be used to sensitize the public about the harmful effects that violence has on children. States should encourage the media to promote non-violent values and implement guidelines to ensure full respect for the rights of the child in all media coverage.

5. Enhance the capacity of all who work with and for children

101. I recommend that the capacity of all those who work with and for children to contribute to eliminate all violence against them must be developed. Initial and in-service training which imparts knowledge and respect for children's rights should be provided. States should invest in systematic education and training programmes both for professionals and non-professionals who work with or for children and families to prevent, detect and respond to violence against children. Codes of conduct and clear standards of practice, incorporating the prohibition and rejection of all forms of violence, should be formulated and implemented.

6. Provide recovery and social reintegration services

102. I recommend that States should provide accessible, child-sensitive and universal health and social services, including pre-hospital and emergency care, legal assistance to children and, where appropriate, their families when violence is detected or disclosed. Health, criminal justice and social service systems should be designed to meet the special needs of children.

7. Ensure participation of children

103. I recommend that States actively engage with children and respect their views in all aspects of prevention, response and monitoring of violence against them, taking into account article 12 of the Convention on the Rights of the Child. Children's organizations and child-led initiatives to address violence guided by the best interests of the child should be supported and encouraged.

8. Create accessible and child-friendly reporting systems and services

104. I recommend that States should establish safe, well-publicized, confidential and accessible mechanisms for children, their representatives and others to report violence against children. All children, including those in care and justice institutions, should be aware of the existence of mechanisms of complaint. Mechanisms such as telephone helplines, through which children can report abuse, speak to a trained counsellor in confidence and ask for support and advice, should be established and the creation of other ways of reporting violence through new technologies should be considered.

9. Ensure accountability and end impunity

105. I recommend that States should build community confidence in the justice system by bringing all perpetrators of violence against children to justice and ensure that they are held accountable through appropriate criminal, civil, administrative and professional proceedings and sanctions. Persons convicted of violent offences and sexual abuse of children should be prevented from working with children.

10. Address the gender dimension of violence against children

106. I recommend that States should ensure that anti-violence policies and programmes are designed and implemented from a gender perspective, taking into account the different risks facing girls and boys in respect of violence; States should promote and protect the human rights of women and girls and address all forms of gender discrimination as part of a comprehensive violence-prevention strategy.

11. Develop and implement systematic national data collection and research

107. I recommend that States improve data collection and information systems in order to identify vulnerable subgroups, inform policy and programming at all levels, and track progress towards the goal of preventing violence against children. States should use national indicators based on internationally agreed standards, and ensure that data are compiled, analysed and disseminated to monitor progress over time. Where not currently in place, birth, death and marriage data registries with full national coverage should be created and maintained. States should also create and maintain data on children without parental care and children in the criminal justice system. Data should be disaggregated by sex, age, urban/rural, household and family characteristics, education and ethnicity. States should also develop a national research agenda on violence against children across settings where violence occurs, including through interview studies with children and parents, with particular attention to vulnerable groups of girls and boys.

12. Strengthen international commitment

108. I recommend that all States ratify and implement the Convention on the Rights of the Child and its two Optional Protocols on the involvement of children in armed conflict and on the sale of children, child prostitution and child pornography. All reservations that are incompatible with the object and purpose of the Convention and the Optional Protocols should be withdrawn in accordance with the Vienna Declaration and Plan of Action of the World Conference on Human Rights of 1993. States should ratify all relevant international and regional human rights instruments that provide protection for children including the Convention against Torture and

Other Cruel, Inhuman or Degrading Treatment or Punishment and its Optional Protocol; the Rome Statute of the International Criminal Court; the Convention on the Elimination of All Forms of Discrimination against Women and its Optional Protocol; ILO Conventions No. 138 on the Minimum Age for Admission to Employment and No. 182 on the Worst Forms of Child Labour; and the United Nations Convention against Transnational Organized Crime and the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime. States should implement all their international legal obligations and strengthen their cooperation with the treaty bodies.

109. I recommend that States act in conformity with their commitments on the prevention of violence made at the special session of the General Assembly on children and in the context of the WHO Health Assembly resolution[74] on implementing the recommendations of the *World Report on Violence and Health*, and other regional public health resolutions that reinforce this resolution.

B. Setting-specific recommendations

1. In the home and family

110. Bearing in mind that the family has the primary responsibility for the upbringing and development of the child and that the State should support parents and caregivers, to care for children, I recommend that States:

(a) Develop or enhance programmes to support parents and other carers in their child-rearing role. Investments in health care, education and social welfare services should include quality early childhood development programmes, home visitation, pre- and post-natal services and income-generation programmes for disadvantaged groups;

(b) Develop targeted programmes for families facing especially difficult circumstances. These may include families headed by women or children, those belonging to ethnic minorities or other groups facing discrimination, and families caring for children with disabilities;

(c) Develop gender-sensitive parent education programmes focusing on non-violent forms of discipline. Such programmes should promote healthy parent-child relationships and orient parents towards constructive and positive forms of discipline and child development approaches, taking into account children's evolving capacities and the importance of respecting their views.

2. In schools and other educational settings

111. Bearing in mind that all children must be able to learn free from violence, that schools should be safe and child friendly and curricula should be rights based, and also that schools provide an environment in which attitudes that condone violence can be changed and non-violent values and behaviour learned, I recommend that States:

[74] Implementing the recommendations of the *World Report on Violence and Health*. Report of the World Health Assembly (WHA56.24), Fifty-sixth World Health Assembly (Geneva, World Health Organization, 2003).

(a) Encourage schools to adopt and implement codes of conduct applicable to all staff and students that confront all forms of violence, taking into account gender-based stereotypes and behaviour and other forms of discrimination;

(b) Ensure that school principals and teachers use non-violent teaching and learning strategies and adopt classroom management and disciplinary measures that are not based on fear, threats, humiliation or physical force;

(c) Prevent and reduce violence in schools through specific programmes which address the whole school environment including through encouraging the building of skills such as non-violent approaches to conflict resolution, implementing anti-bullying policies and promoting respect for all members of the school community;

(d) Ensure that curricula, teaching processes and other practices are in full conformity with the provisions and principles of the Convention on the Rights of the Child, free from references actively or passively promoting violence and discrimination in any of its manifestations.

3. In care and justice systems

112. Bearing in mind that States are responsible for ensuring the safety of children in residential care and juvenile justice detention facilities, I recommend that States:

(a) Prioritize reducing rates of institutionalization of children by supporting family preservation and community-based alternatives, ensuring that institutionalized care is used only as a last resort. Family-based care options should be favoured in all cases and should be the only option for infants and very young children. States should ensure that, wherever possible, children in residential care may be reintegrated with their family under appropriate conditions. Acknowledging the special vulnerability of indigenous children and children belonging to minorities, States should ensure that these children and their families are provided with culturally based support and care services and that social workers have adequate training to work effectively with them;

(b) Reduce the numbers of children entering justice systems by decriminalizing "status offences" (offences that are only a crime when committed by children, for example, truancy, running away from home, or being "beyond parental control"), survival behaviours (such as begging, selling sex, scavenging, loitering or vagrancy) and victimization by trafficking or criminal exploitation. States should also establish comprehensive, child-centred, restorative juvenile justice systems that reflect international standards.[75] Detention should be reserved for child offenders who are assessed as posing a real danger to others, and significant resources should be invested in alternative arrangements, as well as community-based rehabilitation and reintegration programmes;

[75] See for example, articles 37, 39 and 40 of the Convention on the Rights of the Child, the United Nations Standard Minimum Rules for the Administration of Juvenile Justice (the Beijing Rules), the United Nations Guidelines for the Prevention of Juvenile Delinquency (the Riyadh Guidelines), the United Nations Rules for the Protection of Juveniles Deprived of their Liberty and the Guidelines for Action on Children in the Criminal Justice System.

(c) Regularly reassess placements by reviewing the reasons for a child's placement in care or detention facilities, with a view to transferring the child to family or community-based care;

(d) Establish effective and independent complaints, investigation and enforcement mechanisms to deal with cases of violence in care and justice systems;

(e) Ensure that children in institutions are aware of their rights and can access the mechanisms in place to protect those rights;

(f) Ensure effective monitoring and regular access to care and justice institutions by independent bodies empowered to conduct unannounced visits, conduct interviews with children and staff in private, and investigate allegations of violence;

(g) Ratify the Optional Protocol to the Convention against Torture, which provides for a system of independent preventive visits to places of detention.

4. In the workplace

113. Bearing in mind that under-age children should not be in the workplace, and the importance of protecting all children in the workplace from all forms of violence, as provided by ILO Conventions Nos. 138 and 182, the Convention on the Rights of the Child and other international instruments, I recommend that States:

(a) Implement domestic labour laws, mainstream the elimination of child labour into national development policies and give priority to eliminating the "worst forms" of child labour, which are inherently violent. Particular attention should be paid to economic exploitation of children in the informal sector, for example, agriculture, fishing and domestic service, where the phenomenon is more prevalent. In addition, States should ensure that child workers participate in discussions about the solutions to this problem;

(b) Where children are working legally (i.e. in conformity with international conventions), create and implement regulatory regimes and inspection processes that explicitly include violence prevention programmes, reporting systems and complaints procedures;

(c) Where children are working illegally, ensure the availability of recovery and integration programmes that focus on assisting under-age children and those in "worst forms" of labour to leave work, receive education and training, and improve their life chances without further victimization;

(d) Enlist the support of the private sector, trade unions and civil society to form partnerships that stimulate corporate social responsibility measures, and encourage the private sector, trade unions and civil society to adopt ethical guidelines in support of prevention programming in the workplace.

5. In the community

114. Bearing in mind that measures to prevent and respond to violence against children in communities should address social and economic risk factors and the physical environment of the community, I recommend that States:

(a) Implement prevention strategies to reduce immediate risk factors in the community. Risk factors will differ from place to place, but generally include easy

access to alcohol and drugs, possession and carrying of guns and other weapons, and the use of children in illegal activities;

(b) Reduce social and economic inequalities. Governments should analyse the impact of public policies on the vulnerability of communities and their children to violence, and commit substantial investment to the implementation of social, housing, employment, and quality education policies and programmes. Priority should be given to approaches that focus on poverty and improving linkages, participation and social networks within and between different community groups, thereby fulfilling economic, social and cultural rights;

(c) Design and implement child-rights training within police forces that includes information on appropriate ways to deal with all children, particularly those from marginalized groups and those subject to discrimination; educate police about the stages of child development, the process of identity development, the dynamics and nature of violence against children, the difference between regular peer groups and gangs, and the appropriate management of children who are under the influence of alcohol or drugs;

(d) Provide early access to integrated services, including coordinated referral and follow-up services for victims and perpetrators; improve pre-hospital care and emergency medical services for victims, along with physical and psychological support services; provide programmes to rehabilitate perpetrators, while bearing in mind that they should be held fully accountable;

(e) Promote and support local government and civil society initiatives to prevent violence against children, particularly by providing safe recreational and other opportunities for boys and girls;

(f) Encourage and assist local and municipal governments to reduce risk factors in the physical environment. Well-lit and safe public places available for children, including safe routes for children and adolescents to travel through their communities, should be included in urban planning;

(g) Develop an appropriate legal framework that is consistent with relevant international instruments and standards and fully implement domestic laws against trafficking in persons; strengthen efforts to protect all children from trafficking and sexual exploitation, including through bilateral, subregional, regional and international cooperation and in this respect harmonize legal definitions, procedures and cooperation at all levels. Strategies should range from primary prevention (i.e. changing the conditions that make children vulnerable to trafficking) to law enforcement targeting traffickers, and should ensure that victims of trafficking and all forms of related exploitation are not criminalized;

(h) Enhance the prosecution of offences relating to the sale of children, child prostitution and child pornography through the review of domestic laws in order to abolish the requirement of "double criminality".[76] States parties to the Optional Protocol on the sale of children, child prostitution and child pornography should consider amending their legislation using the Optional Protocol as a legal basis for extradition in respect of offences addressed in the Optional Protocol;

[76] An offence should be a crime in both the country in which it took place as well as in the country in which the crime is prosecuted.

(i) Ensure that trafficked children are provided with protection, access to health care, adequate assistance and social reintegration services when they are involved in criminal investigations and the justice process. In this context, I draw the attention of States to the United Nations Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime;[77]

(j) Strengthen efforts to combat the use of information technologies, including the Internet, mobile phones and electronic games, in the sexual exploitation of children and other forms of violence. Support measures to educate and advise children and their carers about the dangers involved in this context. Criminalize and appropriately penalize those who make, distribute, possess or use child pornography;

(k) Encourage the information and communication industry to devise global standards for child protection, undertake research on protective hardware and software solutions, and fund worldwide education campaigns on safe use of the new technologies.

C. Implementation and follow-up

We need your support to stop violence against children, not just in our region, but all over the world. There is a Chinese saying, "Gu Cheung Lan Ming", *which means "no sound can be made if only one hand claps". We, children, are one hand. Adults are the other hand. The community is one hand. The Government is one hand ... We strongly believe that a community with peace, love and unity can be built if we work together for the future!*

Young people, East Asia and the Pacific[78]

115. The primary responsibility for implementing the recommendations rests with the State. However, the participation of other actors at the national, regional and international level is critical to assist the State to carry out its task. These include United Nations entities, civil society organizations including national human rights institutions, professional bodies such as doctors' and nurses' associations, community associations, educators, parents and children.

1. National and regional level

116. Implementation at the national level should be promoted without delay. The integration in national planning processes of measures to prevent and respond to violence against children should take place by 2007 and should include the appointment of a focal point, preferably at ministerial level. Prohibiting violence against children by law and initiating a process to develop reliable national data-collection systems should be achieved by 2009. States should provide information on implementation of these recommendations in their reports to the Committee on the Rights of the Child. A progress report on the implementation of the recommendations should be submitted to the General Assembly at its sixty-fifth session.

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[77] Economic and Social Council resolution 2005/20.

[78] Under 18-Delegates' Keynote Address, in United Nations Secretary-General's Study on Violence against Children Regional Outcome Report: East Asia and the Pacific (2005).

117. International organizations should encourage and support Governments in the implementation of these recommendations. I recommend that international financial institutions review their policies and activities to take account of the impact they may have on children. United Nations country teams should include measures to address violence against children within poverty reduction strategies, coordinated country assessments and development assistance frameworks.

118. Governments should consider establishing an ombudsperson or commissioner for children's rights in accordance with the Principles relating to the status of national human right institutions (The Paris Principles).[79] Working closely with other agencies dealing with public health and child protection issues, this institution should have a clear mandate to monitor children' s rights at national, regional and local levels. Where appropriate, they should have the competence to receive and investigate complaints of violations of children's rights from the public, including children.

119. In the light of the contribution of regional organizations in the development of the Study, regional entities should be involved in the implementation of and follow-up to its recommendations. The further development of regional mechanisms should be encouraged as an important part of the overall framework for follow-up. I encourage regional human rights protection systems also to monitor the implementation.

2. International level

120. In view of the importance of multisectoral coordination in addressing violence against children, I recommend that the General Assembly request the Secretary-General to appoint a special representative on violence against children, to act as a high-profile global advocate to promote prevention and elimination of all violence against children, encourage international and regional cooperation and ensure follow-up to the present recommendations.

121. The special representative should disseminate and promote the recommendations of the Study in different international, regional and national forums. He or she should periodically report to the Human Rights Council and the General Assembly, and should coordinate the preparation of a report on implementation of the recommendations, to be presented to the General Assembly at its sixty-fifth session.

122. The special representative will work closely with , but not duplicate the work of the Committee on the Rights of the Child, the Special Representative of the Secretary-General for Children and Armed Conflict, the Special Rapporteur on the sale of children, child prostitution and child pornography and the Special Rapporteur on violence against women, its causes and consequences and the Special Rapporteur on trafficking in persons, especially women and children. He or she should collaborate with regional human rights protection systems and all other regional and national follow-up initiatives.

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[79] Principles relating to the status of national institutions for the promotion and protection of human rights. Available at http://www.unhchr.ch/html/menu6/2/fs19.htm#annex. These recommendations were endorsed by the General Assembly in its resolution 48/134 of 20 December 1993.

123. The special representative should have an initial mandate of four years. Building on the successful inter-agency collaboration that marked the Study, he or she should be supported by OHCHR, UNICEF and WHO. A United Nations inter-agency group on violence against children with representation from NGOs and children, should support follow-up.